

ENGROSSED SENATE BILL No. 193

DIGEST OF SB 193 (Updated March 22, 2007 6:56 pm - DI 77)

Citations Affected: Noncode.

Synopsis: Comprehensive care bed and hospital moratorium. Extends the moratorium on new comprehensive care beds until June 30, 2008. Establishes a joint notification requirement for a health facility seeking to decertify a replacement bed and another health facility's request for certification of a replacement bed. Adds exemptions from the comprehensive care bed moratorium. Prohibits a hospital from adding or constructing new facilities until June 30, 2008. Establishes an exception for hospitals under development. Requires the health finance commission to study certain issues concerning hospitals.

Effective: Upon passage.

Miller, Rogers

(HOUSE SPONSORS — BROWN C, BROWN T)

January 8, 2007, read first time and referred to Committee on Health and Provider

February 1, 2007, amended, reported favorably — Do Pass. February 20, 2007, read second time, amended, ordered engrossed. February 21, 2007, engrossed. February 22, 2007, read third time, passed. Yeas 31, nays 18.

HOUSE ACTION

February 27, 2007, read first time and referred to Committee on Public Health. March 26, 2007, amended, reported — Do Pass.



First Regular Session 115th General Assembly (2007)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2006 Regular Session of the General Assembly.

ENGROSSED SENATE BILL No. 193

A BILL FOR AN ACT concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. P.L.96-2006, SECTION 2, IS AMENDED TO READ
AS FOLLOWS [EFFECTIVE UPON PASSAGE]: SECTION 2. (a) As
used in this SECTION, "comprehensive care bed" means a bed that:

- (1) is licensed or is to be licensed under IC 16-28-2;
- (2) functions as a bed licensed under IC 16-28-2; or
- (3) is subject to IC 16-28.

The term does not include a comprehensive care bed that will be used solely to provide specialized services and that is subject to IC 16-29.

- (b) As used in this SECTION, "replacement bed" means a comprehensive care bed that is certified:
 - (1) during the same calendar quarter that an existing comprehensive care bed is decertified; however, if the existing comprehensive care bed is not decertified, the certification for the replacement bed expires at the end of the calendar quarter during which certification was granted;
 - (2) during the calendar quarter before the calendar quarter that an existing comprehensive care bed is

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1	decertified; however, if the existing comprehensive care
2	bed is not decertified, the certification of the replacement
3	bed expires at the end of the first calendar quarter after it
4	was certified; or
5	(3) during the quarter after the existing comprehensive
6	care bed is decertified.
7	The health facility seeking certification of replacement beds and
8	the health facility intending to decertify beds shall jointly notify the
9	state department of any transaction involving replacement beds on
10	or before a health facility's request for certification of a
11	replacement bed.
12	(b) (c) This SECTION does not apply to the following:
13	(1) A hospital licensed under IC 16-21-2 that in accordance with
14	IC 16-29-3-1, as amended by this act, converts not more than:
15	(A) thirty (30) acute care beds to skilled care comprehensive
16	long term care beds; and
17	(B) an additional twenty (20) acute care beds to either
18	intermediate care comprehensive long term care beds or
19	skilled care comprehensive long term care beds;
20	that are to be certified for participation in a state or federal
21	reimbursement program, including a program under Title XVIII
22	of the Social Security Act (42 U.S.C. 1395 et seq.) or the state
23	Medicaid program, if those beds will function essentially as beds
24	licensed under IC 16-28.
25	(2) A health facility licensed or to be licensed under IC 16-28 that
26	is under development on June 30, 2006, to add, construct, or
27	convert comprehensive care beds. In determining whether a
28	health facility is under development on June 30, 2006, the state
29	department shall consider:
30	(A) whether:
31	(i) architectural plans have been completed;
32	(ii) funding has been received;
33	(iii) zoning requirements have been met; and
34	(iv) construction plans for the project have been approved
35	by the state department and the division of fire and building
36	safety; and
37	(B) any other evidence that the state department determines is
38	an indication that the health facility is under development.
39	(3) A health facility that is licensed or is to be licensed under
40	IC 16-28 and that adds, constructs, or converts a
41	comprehensive care bed that is a replacement bed for an
42	existing comprehensive care bed.



1	(4) A health facility that is licensed or is to be licensed under
2	IC 16-28 and that applies to certify a comprehensive care bed
3	for participation in a state reimbursement program, if the bed
4	for which the health facility is seeking certification is a
5	replacement bed for an existing certified comprehensive care
6	bed.
7	(5) A continuing care retirement community required to file
8	a disclosure statement under IC 23-2-4.
9	(6) One (1) health facility that is licensed or is to be licensed
10	under IC 16-28 and that meets the following conditions:
11	(A) The health facility will add or construct not more than
12	a total of twenty (20) comprehensive care beds.
13	(B) The director of the division of aging has determined
14	that the health facility will provide an innovative and
15	unique approach to the delivery of comprehensive care
16	that incorporates residential accommodations in a small
17	group setting offering a person centered culture.
18	(7) A hospital that is licensed or is to be licensed under
19	IC 16-21 that is under development on June 30, 2006, to add
20	or construct new facilities. In determining whether a hospital
21	is under development on June 30, 2006, the state department
22	shall consider:
23	(A) whether:
24	(i) architectural plans have been completed;
25	(ii) funding has been received;
26	(iii) zoning requirements have been met; and
27	(iv) construction plans for the project have been
28	approved by the state department and the division of fire
29	and building safety; and
30	(B) any other evidence that the state department
31	determines is an indication that the hospital is under
32	development.
33	(c) (d) Comprehensive care beds may not be added or constructed
34	in Indiana.
35	(d) (e) Residential beds licensed under IC 16-28-2 and unlicensed
36	beds may not be converted to comprehensive care beds.
37	(e) (f) The Indiana health facilities council may not recommend and
38	the state department of health may not approve the certification of new
39	or converted comprehensive care beds for participation in a state
40	reimbursement program, including the state Medicaid program.
41	(g) A hospital licensed or to be licensed under IC 16-21 may not



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add or construct new facilities.

1	(f) (h) This SECTION expires June 30, 2007. June 30, 2008.	
2	SECTION 2. [EFFECTIVE UPON PASSAGE] (a) The health	
3	finance commission shall study the following topics:	
4	(1) Whether hospitals, including specialty hospitals, should be	
5	placed under a moratorium from adding or constructing new	
6	facilities.	
7	(2) Whether specialty hospitals should be restricted from	
8	presenting their facilities to the public as a hospital.	
9	(3) Whether the definition of the term "hospital" under	
10	IC 16-18-2-179 should be amended to include or exclude	
11	certain specialty health facilities.	
12	(b) The health finance commission shall issue its	
13	recommendations concerning the topics studied under subsection	
14	(a) before November 1, 2007.	
15	(c) This SECTION expires December 31, 2007.	
16	SECTION 3. [EFFECTIVE UPON PASSAGE] 405 IAC 5-4-4 is	
17	void. The publisher of the Indiana Administrative Code and	
18	Indiana Register shall remove this section from the Indiana	
19	Administrative Code.	
20	SECTION 4. An emergency is declared for this act.	
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SENATE MOTION

Madam President: I move that Senator Rogers be added as second author of Senate Bill 193.

MILLER

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred Senate Bill No. 193, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 2, between lines 17 and 18, begin a new line block indented and insert:

- "(3) A health facility that is licensed or is to be licensed under IC 16-28 and that adds, constructs, or converts a comprehensive care bed that is a replacement bed for an existing comprehensive care bed.
- (4) A health facility that is licensed or is to be licensed under IC 16-28 and that applies to certify a comprehensive care bed for participation in a state reimbursement program, if the bed for which the health facility is seeking certification is a replacement bed for an existing certified comprehensive care bed.".

and when so amended that said bill do pass.

(Reference is to SB 193 as introduced.)

MILLER, Chairperson

Committee Vote: Yeas 11, Nays 0.

SENATE MOTION

Madam President: I move that Senate Bill 193 be amended to read as follows:

Page 2, between lines 36 and 37, begin a new paragraph and insert: "SECTION 2. [EFFECTIVE UPON PASSAGE] 405 IAC 5-4-4 is void. The publisher of the Indiana Administrative Code and

ES 193-LS 6483/DI 104+











Indiana Register shall remove this section from the Indiana Administrative Code.".

Renumber all SECTIONS consecutively.

(Reference is to SB 193 as printed February 2, 2007.)

MILLER

SENATE MOTION

Madam President: I move that Senate Bill 193 be amended to read as follows:

Page 2, between lines 27 and 28, begin a new line block indented and insert:

"(5) A continuing care retirement community required to file a disclosure statement under IC 23-2-4.".

(Reference is to SB 193 as printed February 2, 2007.)

KENLEY

COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred Senate Bill 193, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Page 1, between lines 8 and 9, begin a new paragraph and insert:

- "(b) As used in this SECTION, "replacement bed" means a comprehensive care bed that is certified:
 - (1) during the same calendar quarter that an existing comprehensive care bed is decertified; however, if the existing comprehensive care bed is not decertified, the certification for the replacement bed expires at the end of the calendar quarter during which certification was granted;
 - (2) during the calendar quarter before the calendar quarter that an existing comprehensive care bed is decertified; however, if the existing comprehensive care bed is not decertified, the certification of the replacement bed expires at the end of the first calendar quarter after it

ES 193—LS 6483/DI 104+











was certified; or

(3) during the quarter after the existing comprehensive care bed is decertified.

The health facility seeking certification of replacement beds and the health facility intending to decertify beds shall jointly notify the state department of any transaction involving replacement beds on or before a health facility's request for certification of a replacement bed.".

Page 1, line 9, strike "(b)" and insert "(c)".

Page 2, between lines 29 and 30, begin a new line block indented and insert:

- "(6) One (1) health facility that is licensed or is to be licensed under IC 16-28 and that meets the following conditions:
 - (A) The health facility will add or construct not more than a total of twenty (20) comprehensive care beds.
 - (B) The director of the division of aging has determined that the health facility will provide an innovative and unique approach to the delivery of comprehensive care that incorporates residential accommodations in a small group setting offering a person centered culture.
- (7) A hospital that is licensed or is to be licensed under IC 16-21 that is under development on June 30, 2006, to add or construct new facilities. In determining whether a hospital is under development on June 30, 2006, the state department shall consider:
 - (A) whether:
 - (i) architectural plans have been completed;
 - (ii) funding has been received;
 - (iii) zoning requirements have been met; and
 - (iv) construction plans for the project have been approved by the state department and the division of fire and building safety; and
 - (B) any other evidence that the state department determines is an indication that the hospital is under development.".
- Page 2, line 30, strike "(c)" and insert "(d)".
- Page 2, line 32, strike "(d)" and insert "(e)".
- Page 2, line 34, strike "(e)" and insert "(f)".
- Page 2, between lines 37 and 38, begin a new paragraph and insert:
- "(g) A hospital licensed or to be licensed under IC 16-21 may not add or construct new facilities.".

Page 2, line 38, strike "(f)" and insert "(h)".



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Page 2, between lines 38 and 39, begin a new paragraph and insert: "SECTION 2. [EFFECTIVE UPON PASSAGE] (a) The health finance commission shall study the following topics:

- (1) Whether hospitals, including specialty hospitals, should be placed under a moratorium from adding or constructing new facilities.
- (2) Whether specialty hospitals should be restricted from presenting their facilities to the public as a hospital.
- (3) Whether the definition of the term "hospital" under IC 16-18-2-179 should be amended to include or exclude certain specialty health facilities.
- (b) The health finance commission shall issue its recommendations concerning the topics studied under subsection (a) before November 1, 2007.
 - (c) This SECTION expires December 31, 2007.". Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to SB 193 as reprinted February 21, 2007.)

BROWN C, Chair

Committee Vote: yeas 7, nays 3.



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